U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only			
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.			
E (AUG152005)			
WE DEST			
1. File Number U - 82.4 []	2. Fiscal Year Covered From:		
У	1 / 1 / 2004 Through: 12/31/2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name JANET L SHENK	Name AFL-CIO		
	Labor Organization File Number O CO - ID C		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 3821 LIVINGSTON ST NW	Street 815 16th St NW		
City WASHINGTON	city Washington		
State DC ZIP Code + 4 200 IS	State DC ZIP Code +4 2000 L		
5. Position in labor organization. Special Assistant to	Provide 4		
Special Hastation			
Enter appropriate data below If, during the past fiscal year, you or your spo (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests sions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	derived income or other economic benefit of		
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Trade Name, if any:			
Exercise de consequencia de la consequencia della consequencia de la consequencia della c			
P.O. Box, Bldg., Room No., if any			
Street	7.b. Amount.		
City			
City State ZIP Code + 4			
State ZIP Code + 4	1993 S. C. S		
State ZIP Code + 4 Sign 15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany)	ature Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the circustry and in the the heat of the		
State ZIP Code + 4 Sign 15. Signature and verification. The undersigned declares, under penalty of	ature Perjury and other applicable penalties of the law, that all of the information ing documents) has been examined by the circustry and in the best of the		
State ZIP Code + 4 Sign 15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany)	ature Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the circustry and in the the heat of the		

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Name of Person Filing	Tanet	Chank
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File Number U-

substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or included the consists of buying from or selling or leasing directly or included in the consists of buying from the consists of buying from or selling or leasing directly or included in the consists of buying from the consists of buying	wise dealing with the business vely seeking to represent, or directly to, or otherwise			
8. Name and address of Business (including trade name, if any). Name Union Privilege Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1125 15 th St. NW, Swite 300 City WASHINGTON State DC ZIP Code +4 2000 S	9. Business deals with: a. Labor Organization b. Trust c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.			
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	Provides Credit cards, Scholarships and other services to members of unions which are affiliated with the AFL-CIO.			
	11.b. Approximate dollar value of such dealing. ພິດ Koພກ			
State ZIP Code + 4	12.a. Nature of interest held or income received. Received Value of 1 business lunch on May 27, 2004 and 1 business lunch on october 21, 2004.			
	12.b. Amount. \$69.54			
C. Received from any employer (other than an employer covered under parts A and B above) as from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				
State State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			